

OMB Approval Number: 2050-0095  
Approved for Use Through: 1/92

**EPA** Potential Hazardous  
Waste Site  
Preliminary Assessment Form

Identification

State: AZ CERCLIS Number: AZD 057907883

CERCLIS Discovery Date:

1. General Site Information

Name: <u>Chemonics</u>		Street Address: <u>734 E. Southern Pacific Drive</u>			
City: <u>Phoenix</u>	State: <u>AZ</u>	Zip Code: <u>85034</u>	County: <u>Maricopa</u>	Co. Code:	Cong. Dist:
Latitude: <u>33° 27' 15" - "</u>	Longitude: <u>112° 04' 45" - "</u>	Approximate Area of Site: <u>6</u> Acres		Status of Site: <input checked="" type="checkbox"/> Active <input type="checkbox"/> Not Specified <input type="checkbox"/> Inactive <input type="checkbox"/> NA (GW plume, etc.)	
				Square Ft	

2. Owner/Operator Information

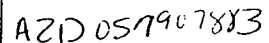
Owner: <u>Pacific Transportation</u>			Operator: <u>Chemonics</u>		
Street Address:			Street Address: <u>734 E. Southern Pacific Drive</u>		
City:			City: <u>Phoenix</u>		
State:	Zip Code:	Telephone:	State:	Zip Code:	Telephone:
		( )	<u>AZ</u>	<u>85034</u>	<u>(602) 254-9685</u>
Type of Ownership: <input checked="" type="checkbox"/> Private <input type="checkbox"/> Federal Agency Name _____ <input type="checkbox"/> State <input type="checkbox"/> Indian			How Initially Identified: <input type="checkbox"/> Citizen Complaint <input type="checkbox"/> PA Petition <input checked="" type="checkbox"/> State/Local Program <input type="checkbox"/> RCRA/CERCLA Notification		
<input type="checkbox"/> County <input type="checkbox"/> Municipal <input type="checkbox"/> Not Specified <input type="checkbox"/> Other _____			<input type="checkbox"/> Federal Program <input type="checkbox"/> Incidental <input type="checkbox"/> Not Specified <input type="checkbox"/> Other _____		

3. Site Evaluator Information

Name of Evaluator: <u>Debi Malone</u>	Agency/Organization: <u>ADEQ</u>	Date Prepared: <u>August 4, 1993</u>
Street Address: <u>3033 N Central Ave</u>	City: <u>Phoenix</u>	State: <u>AZ</u>
Name of EPA or State Agency Contact: <u>Rachel Loftin</u>	Street Address: <u>75 Hawthorne St</u>	
City: <u>San Fran</u>	State: <u>CA</u>	Telephone: <u>(415)</u>

4. Site Disposition (for EPA use only)

Emergency Response/Removal Assessment Recommendation: <input type="checkbox"/> Yes <input type="checkbox"/> No Date: _____	CERCLIS Recommendation: <input type="checkbox"/> Higher Priority SI <input type="checkbox"/> Lower Priority SI <input type="checkbox"/> NFRAP <input type="checkbox"/> RCRA <input type="checkbox"/> Other _____ Date: _____	Signature:  Name (typed):  Position:
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CERCLIS Number:

A20057907883

### 7. Ground Water Pathway

<p>Is Ground Water Used for Drinking Water Within 4 Miles:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Type of Drinking Water Wells Within 4 Miles (check all that apply):</p> <p><input checked="" type="checkbox"/> Municipal <input type="checkbox"/> Private <input type="checkbox"/> None</p>	<p>Is There a Suspected Release to Ground Water:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have Primary Target Drinking Water Wells Been Identified:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes, Enter Primary Target Population:</p> <p>_____ People</p>	<p>List Secondary Target Population Served by Ground Water Withdrawn From:</p> <table><tr><td>0 - 1/4 Mile</td><td>0</td></tr><tr><td>&gt; 1/4 - 1/2 Mile</td><td>0</td></tr><tr><td>&gt; 1/2 - 1 Mile</td><td>89</td></tr><tr><td>&gt; 1 - 2 Miles</td><td>23</td></tr><tr><td>&gt; 2 - 3 Miles</td><td>570</td></tr><tr><td>&gt; 3 - 4 Miles</td><td>0</td></tr><tr><td>Total Within 4 Miles</td><td>680</td></tr></table>	0 - 1/4 Mile	0	> 1/4 - 1/2 Mile	0	> 1/2 - 1 Mile	89	> 1 - 2 Miles	23	> 2 - 3 Miles	570	> 3 - 4 Miles	0	Total Within 4 Miles	680
0 - 1/4 Mile	0															
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> 2 - 3 Miles	570															
> 3 - 4 Miles	0															
Total Within 4 Miles	680															
<p>Depth to Shallowest Aquifer:</p> <p>_____ Feet</p> <p>Karst Terrain/Aquifer Present:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Nearest Designated Wellhead Protection Area:</p> <p><input type="checkbox"/> Underlies Site <input type="checkbox"/> &gt; 0 - 4 Miles <input checked="" type="checkbox"/> None Within 4 Miles</p>															

### 8. Surface Water Pathway

<p>Type of Surface Water Draining Site and 15 Miles Downstream (check all that apply):</p> <p><input type="checkbox"/> Stream <input checked="" type="checkbox"/> River <input type="checkbox"/> Pond <input type="checkbox"/> Lake <input type="checkbox"/> Bay <input type="checkbox"/> Ocean <input type="checkbox"/> Other _____</p>	<p>Shortest Overland Distance From Any Source to Surface Water:</p> <p>_____ Feet</p> <p>_____ Miles</p>																				
<p>Is There a Suspected Release to Surface Water:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Site is Located in:</p> <p><input type="checkbox"/> Annual - 10 yr Floodplain <input type="checkbox"/> &gt; 10 yr - 100 yr Floodplain <input checked="" type="checkbox"/> &gt; 100 yr - 500 yr Floodplain <input type="checkbox"/> &gt; 500 yr Floodplain</p>																				
<p>Drinking Water Intakes Located Along the Surface Water Migration Path:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have Primary Target Drinking Water Intakes Been Identified:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If Yes, Enter Population Served by Primary Target Intakes:</p> <p>_____ People</p>	<p>List All Secondary Target Drinking Water Intakes:</p> <table><thead><tr><th>Name</th><th>Water Body</th><th>Flow (cfs)</th><th>Population Served</th></tr></thead><tbody><tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr><tr><td colspan="4">Total within 15 Miles _____</td></tr></tbody></table>	Name	Water Body	Flow (cfs)	Population Served	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	Total within 15 Miles _____			
Name	Water Body	Flow (cfs)	Population Served																		
_____	_____	_____	_____																		
_____	_____	_____	_____																		
_____	_____	_____	_____																		
Total within 15 Miles _____																					
<p>Fisheries Located Along the Surface Water Migration Path:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have Primary Target Fisheries Been Identified:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>List All Secondary Target Fisheries:</p> <table><thead><tr><th>Water Body/Fishery Name</th><th>Flow (cfs)</th></tr></thead><tbody><tr><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td></tr></tbody></table>	Water Body/Fishery Name	Flow (cfs)	_____	_____	_____	_____	_____	_____	_____	_____										
Water Body/Fishery Name	Flow (cfs)																				
_____	_____																				
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_____	_____																				
_____	_____																				



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### 8. Surface Water Pathway (continued)

Wetlands Located Along the Surface Water Migration Path:

☐ Yes  
☒ No

Have Primary Target Wetlands Been Identified:

☐ Yes  
☒ No

List Secondary Target Wetlands:

Water Body	Flow (cfs)	Frontage Miles
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other Sensitive Environments Located Along the Surface Water Migration Path:

☐ Yes  
☒ No

Have Primary Target Sensitive Environments Been Identified:

☐ Yes  
☒ No

List Secondary Target Sensitive Environments:

Water Body	Flow (cfs)	Sensitive Environment Type
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### 9. Soil Exposure Pathway

Are People Occupying Residences or  
Attending School or Daycare on or Within 200  
Feet of Areas of Known or Suspected  
Contamination:

☐ Yes  
☒ No

If Yes, Enter Total Resident Population:

\_\_\_\_\_ People

Number of Workers Onsite:

☐ None  
☒ 1 - 100  
☐ 101 - 1,000  
☐ > 1,000

Have Terrestrial Sensitive Environments Been Identified on  
or Within 200 Feet of Areas of Known or Suspected  
Contamination:

☐ Yes  
☒ No

If Yes, List Each Terrestrial Sensitive Environment:

### 10. Air Pathway

Is There a Suspected Release to Air:

☐ Yes  
☒ No

Enter Total Population on or Within:

Onsite	60
0 - ¼ Mile	992
> ¼ - ½ Mile	997
> ½ - 1 Mile	11838
> 1 - 2 Miles	33704
> 2 - 3 Miles	30777
> 3 - 4 Miles	40,000
Total Within 4 Miles	118,302

Wetlands Located Within 4 Miles of the Site:

☐ Yes  
☒ No

Other Sensitive Environments Located Within 4 Miles of the Site:

☐ Yes  
☒ No

List All Sensitive Environments Within ½ Mile of the Site:

Distance	Sensitive Environment Type/Wetlands Area (acres)
Onsite	_____
0 - ¼ Mile	_____
> ¼ - ½ Mile	_____